## Index of Claims

## Application/Control No.

Stephen M Johnson

Applicant(s)/Patent Under Reexamination LIU, LIQING

09923368

Art Unit

Examiner

3641

| ~ | Rejected |  |  |  |
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| = | Allowed  |  |  |  |

| - | Cancelled  |
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| ÷ | Restricted |

| N | Non-Elected  |
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| ı | Interference |

| Α | Appeal   |
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| 0 | Objected |

| ☐ Claims | renumbered | in the same | order as pre | sented by applicant |  | ☐ CPA | □ т.с | D. 🗆 | R.1.47 |
|----------|------------|-------------|--------------|---------------------|--|-------|-------|------|--------|
| CLA      | MIM        | DATE        |              |                     |  |       |       |      |        |
| Final    | Original   | 09/29/2007  | 02/12/2008   |                     |  |       |       |      |        |
| 1        | 1          | · /         | =            |                     |  |       |       |      |        |
| 2        | 2          | ·           | =            |                     |  |       |       |      |        |
| 3        | 3          | · /         | =            |                     |  |       |       |      |        |
| 4        | 4          | V           | =            |                     |  |       |       |      |        |
|          | 5          | N           | -            |                     |  |       |       |      |        |
|          | 6          | N           | -            |                     |  |       |       |      |        |
|          | 7          | N           | -            |                     |  |       |       |      |        |
|          | 8          | N           | -            |                     |  |       |       |      |        |
|          | 9          | N           | -            |                     |  |       |       |      |        |
|          | 10         | N           | -            |                     |  |       |       |      |        |
| 5        | 11         |             | =            |                     |  |       |       |      |        |
| 6        | 12         |             | =            |                     |  |       |       |      |        |